UTILITY **PATENT APPLICATION** TRANSMITTAL (Only for new nonprovisional applications under 37 CFR 1.53(b))

Name:

Attorn	ey Docket No.	245651US2				
First Inventor or Application Identifier		cation Identifier	Yoshio TAKAMI			
	METHOD AND OR THE LIKE	D APPARATUS FOR FORMING SUBSTRATE FOR SEMICONDUCTOR				

Registration No.:

APPLICATION ELEMENTS See MPEP chapter 600 concerning utility patent application contents					Commissioner for Patents ADDRESS TO: Mail Stop Patent Application Alexandria, Virginia 22313							
1. Fee Transmittal Form (e.g. PTO/SB/17) (Submit an original and a duplicate for fee processing)					ACCOMPANYING APPLICATION PARTS							rol
	(000)	in an original and a daphoate i	or rec processing)		7.		Assignm	ent Pape	ers (cover sh	eet & d	ocument(s))	U.S
2.	Spec	cification	Total Sheets	65	8.		Applicati	ion Data	Sheet. See	37 CFR	₹ 1.76	9
					9. 🗆			R. §3.73() e is an assi	b) Statement ignee)	t 🗆	Power of Attorney	1751
3.	Draw	ring(s) (35 U.S.C. 113)	Total Sheets	7	10. 🗆	ַ	English ⁻	Translati	on Documen	t (if app	licable)	
					11.			ion Discl nt (IDS)/	osure PTO-1449		Copies of II Citations (1	
4.	Oath	or Declaration	Total Pages	2	12. []	Prelimina	ary Ame	ndment	•		
а		Newly executed (origin	nal)		13.		White Ad	dvance S	Serial No. Po	stcard		
b	b. Copy from a prior application (37 C.F.R. §1.63(d)) (for continuation/divisional with box 17 completed)				14.	14. Certified Copy of Priority Document(s) (1) (if foreign priority is claimed)						
	i. DELETION OF INVENTOR(S) Signed statement attached deleting inventor(s) named in the prior application, see 37 C.F.R. §1.63(d)(2) and				15. Applicant claims small entity status. See 37 CFR 1.27							
5.		1.33(b). ROM or CD-R in duplica ram <i>(Appendix)</i>	ate, large table	or Computer	16.		Other:	Req	juest for Prior	ity, State	ment of Rele	vancy
6. E		eotide and/or Amino Ac pplicable, all necessary		ubmission								
а		Computer Readable Fo	•									
b	. Spe	cification or Sequence L	isting on :									
	i. [CD-ROM or CD-R (2	copies); or									
	ii. [□ Paper										
C	;. 🗆	Statements verifying ide	entity of above	copies								
17. If	a CON	TINUING APPLICATIO	N, check approprie	ate box, and supp	ly the req	uis	ite informat	tion below:				
	☐ Conf	tinuation 🔲 Divisio	onal 🗆	Continuation	in-part	(C	IP)	of prio	r application	no.:		
Pri	Prior application information: Examiner: Group Art Unit:											
For CONTINUATION OR DIVISIONAL APPS only: The entire disclosure of the prior application, from which an oath or declaration is supplied under Box 4b, is considered a part of the accompanying continuation or divisional application and is hereby incorporated by reference. The incorporation can only be relied upon when a portion has been inadvertently omitted from the submitted application parts.												
			18. C	ORRESPONE	ENCE	Αl	DDRESS	3				
				Customer	Num	he	r					
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Signature: \\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\\						_			Date:	11/	21/03	
Name: C. Irvin McClellan					าต			Regis	stration No.:			

Registration Number 21,124



245651US2

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

NTOR(S) Yoshio TAKAMI

SERIAL NO:

New Application

FILING DATE: Herewith

FOR:

METHOD AND APPARATUS FOR FORMING SUBSTRATE FOR SEMICONDUCTOR OR THE LIKE

FEE TRANSMITTAL

COMMISSIONER FOR PATENTS ALEXANDRIA, VIRGINIA 22313

FOR	NUMBER FILED	NUMBER EXTRA	RATE			CALCULATIONS
TOTAL CLAIMS	50 - 20 =	30	х	\$18	=	\$540.00
INDEPENDENT CLAIMS	11 - 3 =	8	х	\$86	=	\$688.00
☐ MULTIPLE DEPENDEN	+	\$290	=	\$0.00		
☐ LATE FILING OF DECL	+	\$130	=	\$0.00		
	\$770.00					
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REDUCTION BY 50% FOR FILING BY SMALL ENTITY						\$0.00
☐ FILING IN NON-ENGLI	FILING IN NON-ENGLISH LANGUAGE					\$0.00
■ RECORDATION OF AS	RECORDATION OF ASSIGNMENT					\$40.00
TOTAL						\$2,038.00

	Please charge Deposit Account No. 15-0030 in the amount of \$0.00 A duplicate copy of this sheet is enclosed.						
	☐ A check in the amount of to cover the filing fee is enclosed	to cover the filing fee is enclosed.					
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	The Director is hereby authorized to charge any additional fees which may be required for the papers being filed herewith and for which no check or credit card payment is enclosed herewith, or credit any overpayment to Deposit Account No. 15-0030. A duplicate copy of this sheet is enclosed.						
	Resp	ectfully Submitted,					
		ON, SPIVAK, McCLELLAND, ER & NEUSTADT, P.C.					
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